SHORT COURSE BOOKING FORM

Please complete this form in BLOCK CAPITALS and return it together with the official registration letter from your institution to:

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| *Regional Centre for Manufacturing Systems Engineering,**Faculty of Engineering, Chulalongkorn University,**Bangkok 10330, Thailand.* |  | *Dr.Parames Chutima**Email:* *cparames@chula.ac.th* |
| *or* | *Ms.Pirada Tuttayong Coordinator**Email: cuse.chula@gmail.com* |

* **Contact Details:**

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| --- | --- |
| Warwick ID: | Click here to enter text. |
| Oversea Centre: | Click here to enter text. |
| Name: | Choose an item. | Click here to enter text. |
| Address: | Click here to enter text. |
| Telephone no: | Click here to enter text. |
| E-mail: | Click here to enter text. |
| Work place: | Click here to enter text. |
| Position: | Click here to enter text. |

* **Course Details:**

|  |  |
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| Module Title: | Choose an item. |
| Module Start Date: | Click here to enter a date. |
| Module End Date: | Click here to enter a date. |

* **Delegate Details:**

|  |  |
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| Current Registration: Are you registered for a Warwick qualification? |  |
| If Yes, please state which qualification: |  |
| Do you wish this module and its assessment to contribute towards your qualification  |  |

* **Fee:** 3,000 TH Baht surcharge for Chulalongkorn University for registration arrangement, food and beverage (compulsory and must pay on arrival)

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| * **Signature:**
 | Date: Click here to enter a date. |